



Iowa Plumbing & Mechanical Systems Board Renewal Application

SUBMIT COMPLETED APPLICATIONS TO:

Iowa Plumbing & Mechanical Systems Board Office
Iowa Dept. of Public Health
321 E 12th Street
Des Moines, IA 50319

Part I - Applicant Information - All items indicated with an * must be completed.

Last Name *	First Name *	Middle Initial	
Date of Birth *	E-mail Address	Telephone *()	
Personal Mailing Address (Street or PO Box) * Address One:		Address Two:	
City *	State *	County *	Zip Code *
Business Name:		Telephone ()	
Business Address One:		Business Address Two:	
Business City	Business State	Business Zip Code	

Please check which address to send correspondence: Personal ☐ Business ☐

The city/state of this address may be listed on licensediniowa.gov with the license status.

Part II – License Information

*Are you a registered contractor in the state of Iowa with Iowa Workforce Development?

☐ No ☐ Yes - IWD contractor registration number: _____

Apprentice Renewal – Apprentice License #	Has your US Department of Labor sponsorship information changed? <input type="checkbox"/> No <input type="checkbox"/> Yes – If yes please provide your new sponsorship information below.		
US DoL Apprentice Identification Number *:	Apprenticeship Start Date *:		
Sponsor Name *:	Sponsor Program Number *:		
Sponsor Mailing Address Line One: *	Sponsor Mailing Address Line Two:		
City*	State*	Zip*	
Sponsor Phone Number*	Sponsor E-mail Address		

Specialty License Renewal - Designate License(s) to renew

Medical Gas Piping Renewal -

Provider – Select One: ☐NITC ☐MGM ☐METC ☐EMGS ☐MGTC ☐AMS ☐Other - _____

Certification Number: _____ Date of expiration: _____

Note – if Other is selected, the application will be reviewed by board before issuance.

<input type="checkbox"/> Hearth Systems License <input type="checkbox"/> Service Technician HVAC License	<input type="checkbox"/> Disconnect/Reconnect Plumbing Technician License <input type="checkbox"/> Private School or College Routine Maintenance License
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Note: For specialty license renewals you must enter Continuing Education courses below as required.

License Changes for Disciplines

SF 427 changes the licensing structure for all licenses issued after 07/01/2014.

- Single HVAC and single refrigeration licenses will be converted to a single HVAC/Refrigeration license
- Licensees holding both an HVAC and refrigeration license will be converted to a single HVAC/Refrigeration license
- Licensees holding an HVAC and/or refrigeration license **and** a hydronics license at the same level of either journeyman or master will be eligible to renew into a single license called a mechanical license
- All CEU's must be completed at time of renewal to renew into the mechanical license

***For each license being renewed please check the box and identify the license number. If you would like to renew to a new mechanical license, check the box in the last column marked mechanical.**

	Plumbing	HVAC &/or Refrigeration Only	Hydronics Only	Mechanical Must possess current HVAC &/or Refrigeration and Hydronics licenses)
Journeyman (active)	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #
Master (active)	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #
Inactive Master/Active Journey	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #	<input type="checkbox"/> License #
Inactive License(s)	<input type="checkbox"/> Journeyman <input type="checkbox"/> Master License #	<input type="checkbox"/> Journeyman <input type="checkbox"/> Master License #	<input type="checkbox"/> Journeyman <input type="checkbox"/> Master License #	<input type="checkbox"/> Journeyman <input type="checkbox"/> Master License #

Continuing Education Hours for Journeyman/Master/Specialty License Renewal

To complete the Continuing Education section below, identify the course name, course number and hours of credit for each course. Please note per Iowa Administrative Code r. 641—30.5(105) Audit of continuing education requirements. The board may conduct an audit of a licensee's license renewal application to review compliance with continuing education requirements. **For a renewal application more than 366 days past the expiration date, provide CEU information or Prometric examination information.**

Course Number: CEUC		Course Name:		Course Date:		
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		Course Name:		Course Date:		
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		Course Name:		Course Date:		
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		Course Name:		Course Date:		
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing

Attach additional sheets if necessary

Journeyperson/Master Renewal by Examination Option**Valid only if 366 days or more past due from original license expiration date**

1st Passed Examination		2nd Passed Examination	
Examination Discipline:		Examination Discipline:	
Date of Examination:	% Score:	Date of Examination:	% Score:
Location of Examination:		Location of Examination:	
3rd Passed Examination		4th Passed Examination	
Examination Discipline:		Examination Discipline:	
Date of Examination:	% Score:	Date of Examination:	% Score:
Location of Examination:		Location of Examination:	

Screening Questions * (All Required)

The following questions must be answered. If you answer "Yes" to questions below (1) attach a signed letter of explanation providing the details of the incident, (2) attach a copy of any court ordered evaluations, showing completion and recommendations, and (3) attach a copy of all official court documents regarding your conviction/malpractice suit, including final disposition and/or settlement. Your application will be referred to the Iowa Plumbing and Mechanical Systems Board for review. You must answer "Yes" even when a conviction or judgment has been deferred or expunged from your record.

During the previous licensing period have you ever been convicted, found guilty of or entered a plea of guilty or no contest to a felony or misdemeanor crime (Other than minor traffic violations with fines under \$500)?	<input type="checkbox"/> Yes – Please see below. <input type="checkbox"/> No
During the previous licensing period have you ever been investigated by a licensing, registration, or certification authority or organization; or had a licensing, registration, or certification authority or organization institute disciplinary action against you related to your professional practice?	<input type="checkbox"/> Yes – Please see below. <input type="checkbox"/> No
During the previous licensing period have you ever been disciplined or sanctioned by any licensing, registration, or certification authority or organization related to your professional practice?	<input type="checkbox"/> Yes – Please see below. <input type="checkbox"/> No
During the previous licensing period have you ever developed a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety?	<input type="checkbox"/> Yes – Please see below. <input type="checkbox"/> No
During the previous licensing period have you ever been engaged in illegal or improper use of drugs or other chemical mood altering substances?	<input type="checkbox"/> Yes – Please see below. <input type="checkbox"/> No

If answering Yes to any of the above questions please provide a brief explanation:

Part IV – Applicant Signature

I certify that I have carefully read the questions on this application and have answered them completely and truthfully. I declare under penalty of perjury that my answers, and all other statements or information submitted by me in this application process, are true and correct. If it is determined at any time that I have provided misleading or false information on, or in support of, this application, I understand that my license may be subject to disciplinary action, license revocation and criminal prosecution.

I also understand that this application is a public record in accordance with Iowa Code Chapter 22 and that application information is public information, subject to the exceptions contained in Iowa law. Finally, in submitting this application, I consent to any reasonable inquiry, including a licensing audit that may be necessary, to verify the information I have provided on, or in conjunction with, this application.

An applicant is responsible for the accuracy of the data regardless of who completes and submits the applicant's licensure application. Incomplete applications shall be considered invalid after 90 days and shall be destroyed.

Applicants Printed Name *:	Applicants Signature *:
Date of Signature *:	

Fee Information – Fees apply per discipline. Licenses that expire June 30th, 2014 will be assessed renewal fees based on the expiration date of 07/01/2014 in the table below. Applicants submitting a renewal application prior to the expiration date listed on their license will receive a prorated fee based on their current expiration date.

Expiration Date of License	Apprentice, Inactive & Discipline Specialty Licenses	Medical Gas Pipe	Journey	Master	IM/Active Journey	Contractor (see Contractor Renewal Application)
07/01/2014 to 12/31/2014	\$50.00	\$75.00	\$180.00	\$240.00	\$230.00	\$250.00
01/01/2015 to 06/30/2015	\$41.70	\$62.55	\$150.12	\$200.16	\$191.82	\$208.50
07/01/2015 to 12/31/2015	\$33.35	\$50.03	\$120.06	\$160.08	\$153.41	\$166.75
01/01/2016 to 06/30/2016	\$25.00	\$37.50	\$90.00	\$120.00	\$115.00	\$125.00
07/01/2016 to 12/31/2016	\$16.65	\$24.98	\$59.94	\$79.92	\$76.59	\$83.25
01/01/2017 to 06/30/2017	\$8.35	\$12.53	\$30.06	\$40.08	\$38.41	\$41.75

Paper Application Fee - A \$25.00 paper application fee is required for each application submitted. A paper application received without the fee included will be returned as incomplete.

Multiple License Discount - A “combined license” of more than one active master, contractor, or journey person license in one or multiple disciplines held by the same individual will be given a 30% discount on the sum total of the separate license fees. All licenses must be purchased in a single transaction.

Late Fees – An application postmarked 31 days or more after the license expiration date will be considered late and will not be processed without appropriate late fees.

Days Late	Fees Due	New Expiration Date	Eligible to Work
1-30 days	\$0.00 Late Fee + cost of renewal license per discipline	06/30/2017	Yes
31-60 days	\$60.00 Late Fee + cost of renewal license per discipline	06/30/2017	Yes
61-365 days	\$60.00 Late Fee + cost of renewal license per discipline	06/30/2017	No
366 + days	*Cost of renewal license per discipline	06/30/2017	No

***Note**, if applying for renewal at 366 or more days past the original expiration date, CEU's must be taken on or after a date that is more than 365 days after the original expiration date.

Privacy Act Notice: Disclosure of your Social Security Number is required by 42 U.S.C. § 666(a) (13) and Iowa Code § 252J.8 (1). The number will be used in connection with the collection of child support obligations and as an internal means to accurately identify licensees. This information may be shared with taxing authorities as allowed by law including Iowa Code § 421.18.

Social Security Number *	Last Name *